

REHABILITATION MEDICINE *Adding Life to Years*

Out of Sight But Not Out of Hope

WE DECIDED TO BRING a neglected subject into sight and into mind with this, the 12th annual special issue of THE WESTERN JOURNAL OF MEDICINE. "Rehabilitation Medicine—Adding Life to Years," presents a rich array of subjects. Some are serious, others less so; all are written with an intensity that only experience can bring. The authors, who know rehabilitation by accident or by intention, were masterfully chosen by the special editor, Julie G. Madorsky, MD.* They have been willing to write and rewrite in response to peer reviewers' and editors' blandishments. They have poured data, ideas, convictions, and feelings into their papers. We are grateful for their hard work.

Readers will find anger and anguish in this issue; they will understand more about control and loss of control. They will have moments of dread and moments of relief, moments of "There but for the grace of God. . . ." They will feel the chill of despair that leads to tragic decisions. Readers will note fiscal poverty in the field—lack of funds for research and lack of funds for aids that allow function and independence—but no poverty of spirit or determination. Readers will warm to bountiful expressions of love and care and caring. They will learn about effective teamwork. They will be struck by the resourcefulness and courage of investigators and patients. They will smile and share triumphs. Above all, readers will be refreshed by hope.

Aristotle asserted that hope is a waking dream. Samuel

Johnson referred to the phantoms of hope. Shakespeare described it more tangibly: "True hope is swift, and flies with swallow's wings."¹ Nathaniel Hawthorne retold the tale of Pandora who, unquenchably curious, opened a forbidden box, unloosing the whole family of troubles upon the world. Cares, sorrows, diseases, pain flew out and settled forever among humankind. Yet there was one last thing left in the box, something sweet, something that shimmered because it was made partly of tears and smiles. Pandora finally unleashed Hope, who said, "As long as you need me . . . I promise never to desert you. There may come times and seasons, now and then, when you think that I have utterly vanished. But again and again, when perhaps you least dream of it, you shall [find me]."² To its core, this special issue of the journal is about hope: fuel for discovery, for progress, for healing.

LINDA HAWES CLEVER, MD

REFERENCES

1. Shakespeare W: *The Tragedy of King Richard the Third*, Act 5, scene 2, line 23
2. Hawthorne N: *The Paradise of Children*. Junior Classics Vol 2. Collier & Son, 1912

*Dr Madorsky is Program Medical Director at Casa Colina Hospital for Rehabilitative Medicine, Pomona, California, and Clinical Associate Professor, Department of Physical Medicine and Rehabilitation, University of California, Irvine, College of Medicine. She was named 1988 Physician of the Year by the President's Committee for Employment of Persons With Disabilities. She is a fellow of the American Academy of Physical Medicine and Rehabilitation and a member of the American Congress of Rehabilitation Medicine. Dr Madorsky had polio at age 2; her own life has led to her interest in rehabilitation care. She uses a three-wheeled electric cart around the hospital for long-distance mobility, speed, and endurance.

Rehabilitation Medicine—A Blossom Among Ashes

ONE RESULT of caring for the wounded and disabled soldiers of World War I was the recognition that certain physical measures rarely used in civilian medicine were beneficial in diagnosing and treating a variety of disabling conditions. In 1921 this observation stimulated the American Medical Association to establish the first organization of physicians interested in the use of physical modalities for diagnosis and treatment.¹ And so, the specialty of Physical Medicine arose from the ashes of World War I, with a dedication to enhance the physical capabilities of those who otherwise would be doomed to join the ranks of the invalids, cripples, shut-ins, and shut-outs of society. By 1938 the term physiatrist was coined to identify physicians specializing in Physical Medicine.

During World War II, a call went out to physicians "to rescue profoundly disabled men and women from the human scrap heap and to return them to the community as useful and respected citizens."² Thus, the mission of the specialty broadened from the restoration of mobility and physical capabilities to the accomplishment of the highest possible levels of health, emotional well being, independence, and productivity to meet the needs of patients with physical impairments. This expansion in the scope of responsibility was accompanied in 1945 by the transformation of the name of the specialty to Physical Medicine and Rehabilitation. And in 1967, to emphasize physiatrists' partnership with other physicians as well as with allied health professionals, the multidisciplinary American Congress of Rehabilitation Medicine was founded.

Our goal in compiling this special issue of THE WESTERN JOURNAL OF MEDICINE is to present the insights and the evolving processes of Rehabilitation Medicine in a way that will make them relevant to the concerns, dilemmas, and the lives of most physicians and their patients. We are indebted to all who have contributed to this issue—physicians, therapists, nurses, sociologists, psychologists, researchers, attorneys, historians, writers, poets, civil rights activists, and students. Many of them have reached high levels of achievement not in the absence of, but in the face of catastrophic physical disabilities of their own. They exemplify the realization of the enormous possibilities inherent in each individual.

In Israel there is a rare cactus plant that has an exquisitely beautiful flower. The flower is called Queen of the Night because it blooms in the darkest part of the night. When the blackness is deepest, the Queen of the Night comes bursting out.³ Rehabilitation Medicine is like that flower, blossoming in the dark night of despair. Rehabilitation enables and ennoble persons to transcend disasters of war, deformity, and disability to shine forth in resiliency, mastery, and achievement.

We all know people whom sorrow made bitter. We dedicate this issue to those people whom sorrow made better.

JULIE GEIGER MADORSKY, MD
Special Editor

REFERENCES

1. Kottke FJ, Knapp ME: The development of physiatry before 1950. *Arch Phys Med Rehabil* 1988; 69:4-14
2. Guttman L: *Spinal Cord Injuries: Comprehensive Management and Research*. Oxford, England, Blackwell Scientific Publications, 1973, p 9
3. Greenberg S: *Say Yes to Life*. New York, Crown Publishers, 1982, p 23